

PAGE	1	OF	4
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>The 2016 Committee</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00569905</span> </div>
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Check if ☐ 24-hour report   
 ☒ 48-hour report   
 ☒ New report   
 ☐ Amends report filed on
 

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Full Name of Payee <b>SAVANNA COMMUNICATIONS, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 01 / 2016	
Mailing Address 755 SONNE DRIVE		Amount 17250.00	
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : SE24.91591 Date of Disbursement or Obligation MM / DD / YYYY 02 / 11 / 2016
Purpose of Expenditure SOCIAL MEDIA ADVERTISING	Category/ Type 004		
Name of Federal Candidate DR. BEN CARSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought	208540.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>SAVANNA COMMUNICATIONS, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 01 / 2016	
Mailing Address 755 SONNE DRIVE		Amount 28750.00	
City ANNAPOLIS	State MD	Zip Code 21041	Transaction ID : <b>SE24.91592</b> Date of Disbursement or Obligation MM / DD / YYYY 02 / 11 / 2016
Purpose of Expenditure DIGITAL ADVERTISING	Category/ Type	004	
Name of Federal Candidate DR. BEN CARSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> House <input type="checkbox"/> Senate	District: _____ State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	208540.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	<div>46000.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	<div></div>
(c) <b>TOTAL</b> Independent Expenditures.....	▶	<div></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

*[Electronically Filed]*

Date \_\_\_\_\_

Signature